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20995                      7590                      12/08/2004

**KNOBBE MARTENS OLSON & BEAR LLP**  
**2040 MAIN STREET**  
**FOURTEENTH FLOOR**  
**IRVINE, CA 92614**

03/02/2005 DEMMANU2 00000017 10033371

01 FC:1501	1400.00	OP
02 FC:1504	300.00	OP
03 FC:8001	9.00	OP

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/033.371	10/19/2001	Alexander K. Khairkhan	MVMDINC.001CP2	7973

TITLE OF INVENTION ~~X~~ ~~A~~ ~~D~~ ~~I~~ ~~S~~ ~~R~~ ~~A~~ ~~B~~ ~~K~~ ~~E~~ ~~L~~ ~~E~~ ~~F~~ ~~I~~ ~~X~~ ~~A~~ ~~M~~ ~~A~~ ~~X~~ ~~A~~ ~~P~~ ~~E~~ ~~N~~ ~~D~~ ~~A~~ ~~G~~ ~~E~~ ~~R~~ ~~O~~ ~~C~~ ~~K~~ ~~S~~ ~~O~~ ~~N~~ ~~D~~ ~~O~~ ~~F~~ ~~W~~ ~~O~~ ~~R~~ ~~K~~

## METHOD OF IMPLANTING A DEVICE IN THE LEFT ATRIAL APPENDAGE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	<del>X</del> <del>OSX</del> No	<del>X</del> <del>555</del> 1,400	\$300	<del>305</del> \$1,700	03/08/2005
EXAMINER		ART UNIT	CLASS-SUBCLASS		
DAWSON, GLENN K		3731	606-200000		

**1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).**

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. **Use of a Customer Number is required.**

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 KNOBBE MARTENS

COLSON & BEAR LLP

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

ev3 Sunnyvale, Inc

Plymouth, MN

Please check the appropriate assignee category or categories (will not be printed on the patent) : ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

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**5. Change in Entity Status (from status indicated above)**

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☒ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

**Authorized Signature**

Date \_\_\_\_\_

Typed or printed name Sabing H. Lee

Registration No. 43,745

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